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# TRANSMITTAL FORM

Application Serial Number	09/943,424
Filing Date	August 30, 2001
First Named Inventor	Kliger
Group Art Unit	2681
Examiner Name	Not yet assigned.
Attorney Docket No.	TIA-001

## ENCLOSURES (check all that apply)

- |  |   |  |
|--|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input checked="" type="checkbox"/> Check Attached<br><input type="checkbox"/> Copy of Fee Transmittal Form  | <input checked="" type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553)<br><input checked="" type="checkbox"/> Formal Drawings (20 sheets) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences        |
| <input type="checkbox"/> Amendment/Response<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____] | <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition<br><input type="checkbox"/> To Convert to a Provisional Application              | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> Extension of Time Request   | <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers)   | <input type="checkbox"/> Status Letter   |
| <input type="checkbox"/> Information Disclosure Statement  | <input type="checkbox"/> Terminal Disclaimer  | <input checked="" type="checkbox"/> Return Receipt Postcard                                |
| <input type="checkbox"/> Form PTO-1449   | <input checked="" type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application   | <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 |
| <input type="checkbox"/> Copies of IDS Citations   | <input type="checkbox"/> Executed Small Entity Statement  | <input type="checkbox"/> Additional Enclosure (please identify below)                      |
| <input type="checkbox"/> Certified Copy of Priority Document(s)  | <input type="checkbox"/> Request for Refund   |  |
| <input checked="" type="checkbox"/> Response to Missing Parts/Incomplete Application   | <input type="checkbox"/> After Allowance Communication to Group   |  |

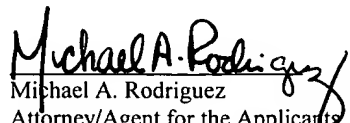
## CORRESPONDENCE ADDRESS

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125 High Street  
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Tel. No.: (617) 248-7000  
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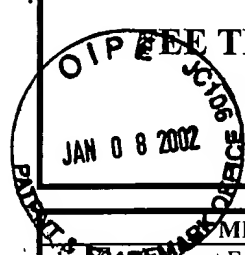
## SIGNATURE BLOCK

Date: December 10, 2001  
Reg. No.: 41,274  
Tel. No.: (617) 248-7501  
Fax No.: (617) 248-7100

Respectfully submitted,

  
Michael A. Rodriguez  
Attorney/Agent for the Applicants  
Testa, Hurwitz & Thibault, LLP  
High Street Tower  
125 High Street  
Boston, MA 02110

sect



**FEE TRANSMITTAL**  
FY 2002

Complete if Known	
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<b>METHOD OF PAYMENT</b>				<b>FEE CALCULATION (continued)</b>																																																																																			
1. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other				<b>3. ADDITIONAL FEES</b> <table border="1"> <thead> <tr> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>130</td> <td>65</td> <td>Surcharge - late filing fee or oath</td> <td>65</td> </tr> <tr> <td>50</td> <td>25</td> <td>Surcharge - late provisional filing fee or cover sheet</td> <td></td> </tr> <tr> <td>130</td> <td>130</td> <td>Non-English specification</td> <td></td> </tr> <tr> <td>2,520</td> <td>2,520</td> <td>Request for ex parte reexamination</td> <td></td> </tr> <tr> <td>110</td> <td>55</td> <td>Extension for reply within first month</td> <td></td> </tr> <tr> <td>400</td> <td>200</td> <td>Extension for reply within second month</td> <td></td> </tr> <tr> <td>920</td> <td>460</td> <td>Extension for reply within third month</td> <td></td> </tr> <tr> <td>1440</td> <td>720</td> <td>Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>1960</td> <td>980</td> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>320</td> <td>160</td> <td>Notice of Appeal</td> <td></td> </tr> <tr> <td>320</td> <td>160</td> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>280</td> <td>140</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>130</td> <td>130</td> <td>Petitions to the Commissioner</td> <td></td> </tr> <tr> <td>180</td> <td>180</td> <td>Submission of Information Disclosure Statement</td> <td></td> </tr> <tr> <td>740</td> <td>370</td> <td>Filing a submission after final rejection (37 CFR 1.129(a))</td> <td></td> </tr> <tr> <td>740</td> <td>370</td> <td>For each additional invention to be examined (37 CFR 1.129(b))</td> <td></td> </tr> <tr> <td>100</td> <td>100</td> <td>Certificate of Correction for applicant's error</td> <td></td> </tr> <tr> <td colspan="2">Other fee (Specify)</td> <td></td> <td></td> </tr> <tr> <td colspan="2">Other fee (Specify)</td> <td></td> <td></td> </tr> </tbody> </table>				Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description	Fee Paid	130	65	Surcharge - late filing fee or oath	65	50	25	Surcharge - late provisional filing fee or cover sheet		130	130	Non-English specification		2,520	2,520	Request for ex parte reexamination		110	55	Extension for reply within first month		400	200	Extension for reply within second month		920	460	Extension for reply within third month		1440	720	Extension for reply within fourth month		1960	980	Extension for reply within fifth month		320	160	Notice of Appeal		320	160	Filing a brief in support of an appeal		280	140	Request for oral hearing		130	130	Petitions to the Commissioner		180	180	Submission of Information Disclosure Statement		740	370	Filing a submission after final rejection (37 CFR 1.129(a))		740	370	For each additional invention to be examined (37 CFR 1.129(b))		100	100	Certificate of Correction for applicant's error		Other fee (Specify)				Other fee (Specify)			
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2. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 20-0531. <input type="checkbox"/> Required Fees (copy of this sheet enclosed). <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17. <input checked="" type="checkbox"/> Overpayment Credit.																																																																																							
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Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100				Respectfully submitted,  Michael A. Rodriguez Attorney for the Applicants Testa, Hurwitz & Thibault, LLP High Street Tower-125 High Street Boston, MA 02110 Date: December 10, 2001 Reg. No.: 41,274 Tel. No.: (617) 248-7501 Fax No.: (617) 248-7100																																																																																			